

## **Stress, Stressors, and Stress Management**

**EVIDENCE BASED PRACTICES (EBP):** Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics, i.e. Nutrition, Stress Management, Cognitive Behavioral, and more...

### **Consistency in the Group Setting**

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

### **Psychoeducational Groups and Crisis Event Processing (when requested)**

#### **Notes to Facilitator(s):**

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3<sup>rd</sup> of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

### **Prepare Professionals**

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

## Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

### Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3<sup>rd</sup> of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

### Group Beginning Suggestions

A positive group beginning (and ending) is extremely important. There are many ways to begin (and end) a group in a positive way. Suggestions to choose from can include:



1. Reading the Thought For The Day from a meditation book. (Note: Meditation books that also contain an index at the end of the book – such as *Easy Does It* – are helpful in choosing a specific reading that matches the topic(s) presented in group like Self-Esteem.), or
  2. Reading an inspirational or humorous curriculum handout from *THE BASICS, Second Edition*, or
  3. Practicing a deep breathing or a stretching exercise, *or*
  4. Sharing of one thing that each person is grateful for today, *or*
  5. Sharing of one positive thing that he/she did that contributed to their recovery in the past few days, *or*
  6. Reading an AA Slogan with a brief explanation or AA/NA/Dual Recovery inspirational reading.
- \* Recommended Beginning: Breathing Exercise (located on page Master Tips 3)

### Practice Curriculum/Topic


Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

## Stress, Stressors, and Stress Management

### Volume II; Subject Five; Pages: Subject 5-25 – 5-32

Based on a 2-Hour group: Two 50 minute segments	Time-Frame
<b>Group Beginning</b>	<b>20 Minutes Total</b>
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> <li>1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not inter-personal processing or case management questions which do not apply to the entire group.)                             <ol style="list-style-type: none"> <li>a. Ask the group members to tell the group their name.</li> <li>b. Welcome any group members who are new to this group or phase.</li> </ol> </li> <li>2. Crisis Processing (when requested and optional):                             <ol style="list-style-type: none"> <li>a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan.</li> <li>b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members.</li> </ol> </li> </ol>	10 Minutes 
<p><u>Summarize Introduction of the Group Topic and Why It’s Important (page Subject 5-25):</u>                      Stress is the reaction of the brain and body to something that upsets their usual balance (OnHealth Network, 2000). Nothing upsets this balance more than change, which is something human beings typically don’t like. Simply said, stress can be viewed as change – something life is full of. This means stress is a part of everyone’s life. It doesn’t matter if it’s a “good” change or a “bad” change. They both have the potential to result in stress because they both upset the expected daily balance (Burns, 1990).</p> <p>Today we will talk about recognizing signs of stress, stress reactions, and ways to manage stress.</p>	5 Minutes 





**Stress, Stressors, and Stress Management; Volume II; Subject Five; Pages: Subject 5-25 – 5-32**

<b>Psychoeducation Part I: Topics &amp; Focus</b>	<b>Pages &amp; Location</b>	<b>Presentation Suggestions</b>	<b>Time- Frame</b>															
Eustress or Distress Produce Same Effects	Subject 5-25	Summarize two paragraphs.	30 Minutes  															
Stressors in Our Society	Subject 5-25	1. Summarize brief introduction 2. Mention examples of stressors in our society from the table:																
<table border="1"> <tr> <td>EMOTIONAL</td> <td>CHANGE</td> <td>WORK</td> <td>PHOBIA OR FEAR</td> <td>DISEASE</td> </tr> <tr> <td>FAMILY</td> <td>CHEMICAL</td> <td>DECISION</td> <td>PHYSICAL</td> <td>PAIN</td> </tr> <tr> <td>SOCIAL</td> <td>ENVIRONMENTAL</td> <td>COMMUTING</td> <td></td> <td></td> </tr> </table>				EMOTIONAL	CHANGE	WORK	PHOBIA OR FEAR	DISEASE	FAMILY	CHEMICAL	DECISION	PHYSICAL	PAIN	SOCIAL	ENVIRONMENTAL	COMMUTING		
EMOTIONAL	CHANGE	WORK		PHOBIA OR FEAR	DISEASE													
FAMILY	CHEMICAL	DECISION		PHYSICAL	PAIN													
SOCIAL	ENVIRONMENTAL	COMMUTING																
Treatment and Recovery Bring About Changes	Subject 5-26	Summarize five paragraphs.																
Changes in The Recovery Process	Subject 5-26 – 5-27	Summarize information in the table and paragraph.																
Recognizing Signs of Stress	Subject 5-27	Summarize one paragraph.																
Stress Specific Responses of Neurotransmitter or “Brain Reactors”	Subject 5-27	Summarize two paragraphs.																
Effects of Stress on Psychiatric and Substance Disorders	Subject 5-27	Summarize two paragraphs.																
Stressors and Stress Reactions	Subject 5-28	Summarize one brief paragraph.																
Is It Stressful or Not?	Subject 5-28	Summarize two paragraphs.																
Taking Charge of Your Reactions	Subject 5-28	Summarize four paragraphs.																
Hardiness or Stress Resistant Factors	Subject 5-28 – 5-29	Summarize three hardiness factors:																
<b>Break</b>			10 Minutes															

**Stress, Stressors, and Stress Management; Volume II; Subject Five; Pages: Subject 5-25 – 5-32**

Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
Stress Cycle	Subject 5-30	Summarize paragraph and describe the sequence of the effects of a stress response (as time allows) from the table on the next page:	15 Minutes	20 Minutes
			<p style="text-align: center;">↓</p> <p style="text-align: center;">15 Minutes</p> <p style="text-align: center;">↓</p>	<p style="text-align: center;">↓</p> <p style="text-align: center;">20 Minutes</p> <p style="text-align: center;">↓</p>

**Stress, Stressors, and Stress Management; Volume II; Subject Five; Pages: Subject 5-25 – 5-32**

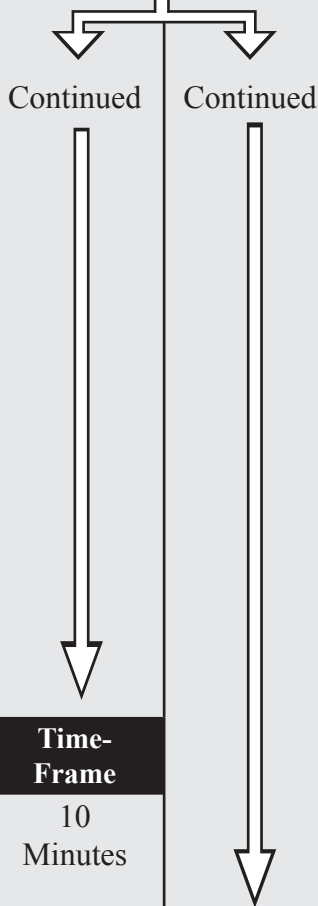
Psychoeducation Part II: Topics & Focus (continued)	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
Finding the Stress Reduction Skill That Works	Subject 5-31	Summarize three paragraphs.	Continued	Continued
Co-Occurring Disorders and Stress Management Skills	Subject 5-32	Summarize one paragraph.		
<p><b><u>To the Group:</u></b> (cover only as much as time allows)</p> <ol style="list-style-type: none"> <li>1. What comments do you have?</li> <li>2. What stresses you out?</li> <li>3. Are there times when you're stressed that you worsen your stress by your reaction to the stressor?</li> <li>4. Are there times when you're stressed that you lessen your stress by your reaction to the stressor?</li> <li>5. Can someone name a stressor that has the potential to cause a stress reaction? Like getting bad new from the court? Having to go to treatment in the first place? Relationship problems?</li> <li>6. Let's brain storm what might be the first reaction to:               <ol style="list-style-type: none"> <li>a. Perception of Stressor? Example, "Yes, I is important!"</li> <li>b. Emotional Arousal? What might you feel?</li> <li>c. Physical Arousal? How might you physically feel?</li> <li>d. Stress Reaction? Is your stress reaction worsened or reduced?</li> <li>e. Following along with the graphic on the page before – how can you take charge or your stress and change or help your perception? Emotional arousal? Physical Arousal? Stress Reaction?</li> </ol> </li> <li>7. It takes time and practice to learn to manage your reaction to a stressor.</li> <li>8. In the next section we will focus on a great technique for managing a stressor and lessening a stress reaction.</li> </ol>				
<p><b>Skill Building Exercise and Discussion - Suggestions for topic discussion:</b></p>				
<p><b><u>To Facilitator(s):</u></b></p> <ol style="list-style-type: none"> <li>1. It is recommended that any group content for this particular group be written on the board prior to the beginning of group.</li> <li>2. You will find examples of each of the four quadrants on Subject 5-30. The information in that table will provide everything you need to discuss the information below. Ask the group to give examples of the four quadrants of the table:</li> </ol> <p><b><u>To the Group:</u></b></p>			15 Minutes	20 Minutes
Finding the Stress Reduction Skill That Works	Subject 5-31	Summarize three paragraphs.		
1 "How important is it?"	2 "Can I control this event?"			

**Stress, Stressors, and Stress Management; Volume II; Subject Five; Pages: Subject 5-25 – 5-32**

**Skill Building Exercise and Discussion - Suggestions for topic discussion:**

**Time-Frame with Crisis Processing**      **Time-Frame without Crisis Processing**

<b>IMPORTANT &amp; UNCONTROLLABLE</b>	<b>IMPORTANT &amp; CONTROLLABLE</b>
_____	_____
_____	_____
<b>UNIMPORTANT &amp; UNCONTROLLABLE</b>	<b>UNIMPORTANT &amp; CONTROLLABLE</b>
_____	_____
_____	_____



**To the Facilitator and the Group:**

- Briefly cover the following information.
- Ask group members to think of at least one stress management technique they will practice this week from the table you are about to summarize.

Stress Management Techniques	Subject 5-32
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THINKING	FEELINGS	BEHAVIORS
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**Crisis Processing**

- Ask the group member(s) to tell the group what happened.
- Explore options and/or develop an immediate plan for coping.
- Allow the group to offer support.

**Time-Frame**  
10 Minutes

**“Paper Work”**

Group participants fill out Group Notes.

**Time-Frame**  
5 Minutes

**Group Closure**

- Recommended INSPIRATIONAL HANDOUT *Recovery “Letting Go”* located at the back of Subject Five. Presentations suggestions include:
- Read the handout to the group, *or*
  - Ask a group member to read the handout out loud to the group, *or*
  - Give a copy to each group member to take home and ask for a volunteer to read the handout to the group.

**Time-Frame**  
5 Minutes